

<i>SERFF Tracking Number:</i>	<i>FRCS-127037652</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Vantis Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48054</i>
<i>Company Tracking Number:</i>	<i>5353</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>Classic and Prestige Annuities</i>		
<i>Project Name/Number:</i>	<i>VANTIS/86/86</i>		

Filing at a Glance

Company: Vantis Life Insurance Company

Product Name: Classic and Prestige Annuities SERFF Tr Num: FRCS-127037652 State: Arkansas

TOI: A02I Individual Annuities- Deferred Non-Variable SERFF Status: Closed-Approved- Closed State Tr Num: 48054

Sub-TOI: A02I.002 Flexible Premium Co Tr Num: 5353 State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird

Author: Exselsa Cartwright Disposition Date: 12/09/2011

Date Submitted: 02/22/2011 Disposition Status: Approved-Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: VANTIS/86

Project Number: 86

Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: Submitted on or about this same date.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 12/09/2011

State Status Changed: 02/28/2011

Deemer Date:

Created By: Exselsa Cartwright

Submitted By: Exselsa Cartwright

Corresponding Filing Tracking Number:

Filing Description:

We have been retained by Vantis Life Insurance Company to file the enclosed forms for approval in your state.

Our fee of \$150 has been sent by EFT on this same date.

The Company offers their assurances that the Complaint Notice required by Section 23-79-138 and the Guaranty Association notice required by Regulation 49 will be provided.

Form CMP CX1001 is a flexible premium deferred annuity sold on a qualified basis. This form is issued with a 3, 5 or 7

<i>SERFF Tracking Number:</i>	<i>FRCS-127037652</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Project Name/Number:</i>	<i>VANTIS/86/86</i>		

year surrender charge period as elected by the owner. This annuity contains a waiver of surrender charge feature in the case of terminal illness or for certain partial withdrawals, as described in the contract.

Application CMP 2861 will be used to apply for the above annuity and may be used to apply for other annuities in the future. Required fraud warnings appear on form CMP FRD, which is attached as supporting documentation. This page will be attached to the application.

Form CMP ENDIRA is an IRA endorsement for compliance with current Internal Revenue Service requirements. The form may be used with the above contract and will be added as needed to previously approved annuity contracts. The endorsement may also be made available for use with other annuities later approved.

This product is designed as an accumulation vehicle for tax deferred savings for qualified accounts. It will be offered to the general public aged 18 to 85 through licensed agents and financial institutions.

Additional details of these products are provided in the Actuarial Memorandum.

To the best of our knowledge, this filing is complete and intended to comply with the insurance laws of your jurisdiction.

If you have any questions or need additional information, please call toll-free 1-800-927-2730. Thank you for your assistance.

Company and Contact

Filing Contact Information

Exselsa Cartwright, Senior Compliance Specialist	exselsa.cartwright@firstconsulting.com
1020 Central Suite 201	800-927-2730 [Phone] 2757 [Ext]
Kansas City, MO 64105	816-391-2755 [FAX]

Filing Company Information

(This filing was made by a third party - FC01)

Vantis Life Insurance Company	CoCode: 68632	State of Domicile: Connecticut
200 Day Hill Road	Group Code:	Company Type:
Windsor, CT 06095	Group Name:	State ID Number:
(860) 298-6008 ext. [Phone]	FEIN Number: 06-0523876	

.....

Fee Required?	Yes
Fee Amount:	\$150.00
Retaliatory?	No
Fee Explanation:	\$50 PER FORM X 3 FORMS = \$150
Per Company:	No

Vantis Life Insurance Company

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<i>Filing Company:</i>	<i>Vantis Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48054</i>
<i>Company Tracking Number:</i>	<i>5353</i>		
<i>TOI:</i>	<i>A021 Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A021.002 Flexible Premium</i>
<i>Product Name:</i>	<i>Classic and Prestige Annuities</i>		
<i>Project Name/Number:</i>	<i>VANTIS/86/86</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	12/09/2011	12/09/2011
Approved-Closed	Linda Bird	02/28/2011	02/28/2011

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Life & Annuity - Acturial Memo	Kevin Wiggs	12/07/2011	12/08/2011

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Request to Re-Open	Note To Filer	Linda Bird	12/07/2011	12/07/2011
Request to Re-Open	Note To Reviewer	Kevin Wiggs	12/06/2011	12/06/2011

<i>SERFF Tracking Number:</i>	<i>FRCS-127037652</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>Classic and Prestige Annuities</i>		
<i>Project Name/Number:</i>	<i>VANTIS/86/86</i>		

Disposition

Disposition Date: 12/09/2011

Implementation Date:

Status: Approved-Closed

Comment: Company has submitted corrected Actuarial Memorandum.

Rate data does NOT apply to filing.

SERFF Tracking Number: FRCS-127037652 State: Arkansas

Filing Company: Vantis Life Insurance Company State Tracking Number: 48054

Company Tracking Number: 5353

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium
Variable

Product Name: Classic and Prestige Annuities

Project Name/Number: VANTIS/86/86

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document (revised)	Life & Annuity - Actuarial Memo		No
Supporting Document	Life & Annuity - Actuarial Memo	Replaced	No
Supporting Document	Fraud Warning Page		Yes
Form	Individual Flexible Premium Deferred Annuity		Yes
Form	Application		Yes
Form	IRA Endorsement		Yes

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<i>Filing Company:</i>	<i>Vantis Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48054</i>
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<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>Classic and Prestige Annuities</i>		
<i>Project Name/Number:</i>	<i>VANTIS/86/86</i>		

Disposition

Disposition Date: 02/28/2011

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	FRCS-127037652	State:	Arkansas
Filing Company:	Vantis Life Insurance Company	State Tracking Number:	48054
Company Tracking Number:	5353		
TOI:	A021 Individual Annuities- Deferred Non-Variable	Sub-TOI:	A021.002 Flexible Premium
Product Name:	Classic and Prestige Annuities		
Project Name/Number:	VANTIS/86/86		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document (<i>revised</i>)	Life & Annuity - Acturial Memo		No
Supporting Document	Life & Annuity - Acturial Memo	Replaced	No
Supporting Document	Fraud Warning Page		Yes
Form	Individual Flexible Premium Deferred Annuity		Yes
Form	Application		Yes
Form	IRA Endorsement		Yes

SERFF Tracking Number: FRCS-127037652 State: Arkansas
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Company Tracking Number: 5353
TOI: A02I Individual Annuities- Deferred Non- Sub-TOI: A02I.002 Flexible Premium
Variable
Product Name: Classic and Prestige Annuities
Project Name/Number: VANTIS/86/86

Amendment Letter

Submitted Date: 12/08/2011

Comments:

Just recently, the Company determined that its standard nonforfeiture law (SNFL) calculation is incorrect and that the following changes need to be made:

- On the CMP CX1001 form, the surrender charges for the 7 year option need to be reduced. Please note that these were bracketed, since there were three options (3, 5 or 7 year), but the actuarial memorandum specified what would show for each of these years and it is now incorrect. A revised actuarial memorandum is enclosed.

This form has not been marketed and will not be marketed with the incorrect surrender charges.

If you have any questions or need additional information, please call toll-free 1-800-927-2730. Thank you for your assistance.

Changed Items:

Supporting Document Schedule Item Changes:

Satisfied -Name: Life & Annuity - Acturial Memo

Comment:

GENERIC ActMemo_TaxSaver_Classic_Indexed 2011.pdf

<i>SERFF Tracking Number:</i>	<i>FRCS-127037652</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>Classic and Prestige Annuities</i>		
<i>Project Name/Number:</i>	<i>VANTIS/86/86</i>		

Note To Filer

Created By:

Linda Bird on 12/07/2011 08:31 AM

Last Edited By:

Linda Bird

Submitted On:

12/07/2011 08:31 AM

Subject:

Request to Re-Open

Comments:

Filing has been re-opened in order for corrections to be made.

<i>SERFF Tracking Number:</i>	<i>FRCS-127037652</i>	<i>State:</i>	<i>Arkansas</i>
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<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>Classic and Prestige Annuities</i>		
<i>Project Name/Number:</i>	<i>VANTIS/86/86</i>		

Note To Reviewer

Created By:

Kevin Wiggs on 12/06/2011 01:26 PM

Last Edited By:

Kevin Wiggs

Submitted On:

12/06/2011 01:26 PM

Subject:

Request to Re-Open

Comments:

On behalf of the Company, we would like to request that this filing be re-opened.

Just recently, the Company determined that its standard nonforfeiture law (SNFL) calculation is incorrect and that the following changes need to be made:

- On the CX1001 form, the surrender charges for the 7 year option need to be reduced. Please note that these were bracketed, since there were three options (3, 5 or 7 year), but the statement of variability specified what would show for each of these years and it is now incorrect. The actuarial memorandum would change too.

This form has not been marketed and will not be marketed with the incorrect surrender charges.

If you have any questions or need additional information, please call toll-free 1-800-927-2730. Thank you for your assistance.

SERFF Tracking Number: FRCS-127037652 State: Arkansas

Filing Company: Vantis Life Insurance Company State Tracking Number: 48054

Company Tracking Number: 5353

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium
Variable

Product Name: Classic and Prestige Annuities

Project Name/Number: VANTIS/86/86

Form Schedule

Lead Form Number: CMP CX1001

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	CMP CX1001	Policy/Cont Individual Flexible ract/Fratern Premium Deferred al Annuity Certificate	Initial		52.500	CMP_CX1001-FINAL-dist-ocr.pdf
	CMP 2861	Application/ Application Enrollment Form	Initial		55.200	CMP2861-dist-ocr.pdf
	CMP ENDIRA	Policy/Cont IRA Endorsement ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		0.000	CMP_ENDIRA-dist-ocr.pdf

VANTIS LIFE INSURANCE COMPANY
[200 Day Hill Road
Windsor, CT 06095]
[www.vantislife.com]

As You read through the contract, remember that the words “We”, “Us”, and “Our” refer to Vantis Life Insurance Company. The words “You” and “Your” refer to the Contract Owner.


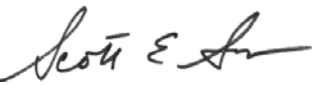
Your contract is written in readable language to help You better understand Your annuity benefits. This contract is not a federally insured deposit and is not an obligation of nor is it guaranteed by any federally insured bank. Please ask Your Vantis Life Insurance Company representative to answer any questions about the contract.

This is a Qualified Flexible Premium Deferred Annuity. The Initial Interest Rate stated on the Schedule Page applies to the Initial Premium only, for the first contract year. A Renewal Interest Rate will be determined on each contract anniversary. The Minimum Guaranteed Interest Rate is stated on the Schedule Page. All declared rates are effective annual percentage rates.

If for any reason You are not satisfied with this contract, You may return it to Our Home Office or to any of Our agents within 10 days after You receive it. Any premium paid during this time will be refunded to You. This right to examine is extended to 30 days if a replacement of existing insurance is involved.

To obtain information or to make further inquiries regarding the contract, You may call Us at [866-826-8471].

Signed for Vantis Life Insurance Company at its Home Office, [200 Day Hill Road, Windsor, CT 06095].

 Peter L. Tedone, President and CEO	 Scott E. Smith, Sr. Vice President
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INDIVIDUAL FLEXIBLE PREMIUM DEFERRED ANNUITY
Non-Participating

Annuity income is payable if the Annuitant is living on the Annuity Start Date. Death proceeds are payable upon the first death of an Owner. A Cash Surrender Value is available before the Annuity Start Date. Premiums are flexible and may be paid prior to the Annuity Start Date, subject to limitations.

Insurance products offered by Vantis Life Insurance Company are not deposits, are not insured by the FDIC or any other Federal Government Agency, and are not obligations of, nor guaranteed by any bank and may be subject to investment risk.

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THE SCHEDULE PAGE

CONTRACT NUMBER	[027F090013]
PLAN	[TaxSaver Classic 7 - Qualified Flexible Premium Deferred Annuity]
OWNER	[John Q. Customer]
ANNUITANT	[John Q. Customer]
ISSUE DATE	[APRIL 15, 2008]
ANNUITY PAYMENT OPTION*	[Life Income with 10 Years Guaranteed]
ANNUITY START DATE*	[AUGUST 3, 2048]
AGENCY/SERVICER	[Agency]
INITIAL PREMIUM	[\$500,000.00]
INITIAL INTEREST RATE	[1.000%]
SURRENDER CHARGE PERIOD	[7 YEARS] STARTING ON THE ISSUE DATE
SURRENDER CHARGE PERCENTAGE BY CONTRACT YEAR	[CONTRACT YEAR 1: 7.000%] [CONTRACT YEAR 2: 7.000%] [CONTRACT YEAR 3: 7.000%] [CONTRACT YEAR 4: 6.000%] [CONTRACT YEAR 5: 5.000%] [CONTRACT YEAR 6: 4.000%] [CONTRACT YEAR 7: 3.000%]

The Initial Interest Rate is an annual percentage rate which applies to the Initial Premium only, for the first contract year. A Renewal Interest Rate will be determined on each contract anniversary. The Minimum Guaranteed Interest Rate is [1.00]%.

* The Owner may change the Annuity Start Date and Annuity Payment Option at any time prior to the Annuity Start Date subject to the terms of the annuity contract.

Vantis Life Insurance Company

SECTION I

CONTRACT BASICS

ANNUITANT

The Annuitant is the person named in the attached application to receive annuity payments beginning on the Annuity Start Date and upon whose life the annuity payments will be based. The Annuitant cannot be:

- a corporation, partnership or association, or other business entity;
- a trustee or estate.

BENEFICIARY

A Beneficiary is any party named in Our records to receive death proceeds upon the death of the Owner, or to receive the remaining guaranteed annuity payments, as described in Section V, upon the death of the Annuitant. The original Beneficiary is named in the attached application for this contract.

If the Owner dies before the Annuity Start Date, We will pay the death proceeds as described in Section II - Distribution Requirements Upon Death of Owner, to the named Beneficiary and the contract will end. The death proceeds will equal the Annuity Purchase Amount as defined in Section V.

The Owner may change the Beneficiary at any time. When We receive a request to change the Beneficiary, the change will take effect as of the date the request is signed. So, if the Owner dies between the date of signing and date of receipt, the change will still take effect. However, We will not be liable for any payments We make or actions We take before receiving the request.

The Owner may name more than one Beneficiary. A numbered sequence may be used to list them. If two or more Beneficiaries are named without a numbered sequence or with the same number, then they will share the death proceeds equally. The living Beneficiary with the lowest number when death proceeds are due to the named Beneficiary will be entitled to the proceeds. If no Beneficiary survives the Owner, then the death proceeds shall be paid to the Owner's estate.

Any Beneficiary may be named an Irrevocable Beneficiary. An Irrevocable Beneficiary's rights cannot be changed without his or her consent. The Owner can exercise all contract rights without the consent of Beneficiaries, except Irrevocable Beneficiaries.

Beneficiaries who are not irrevocable have no rights in this contract until a benefit is determined to be due to them.

OWNER

The original Owner of this contract is named in the attached application. The Owner must be the Annuitant.

Before the Annuity Start Date, this contract gives the Owner the right to:

- change the Annuity Start Date, Annuity Payment Option and frequency of annuity payments;
- make partial cash withdrawals;
- surrender this contract for cash;
- request a duplicate contract; and
- change the Beneficiary.

The above rights may be exercised by a written request to Us on a form We approve. The consent of all Irrevocable Beneficiaries must be given before any change in this contract is made by the Owner.

NOTIFICATION OF DEATH

The death of any Owner or Annuitant is to be reported to Us immediately. We are entitled to recover any overpayments made because of a failure to notify Us of any such death. We are not responsible for any incorrect payments which result from a failure to immediately notify Us of the death of any Owner or Annuitant. We may periodically require proof that the Owner and/or Annuitant is still alive and may withhold any payments until such proof is received at Our Home Office. Any death benefit due will be payable upon receipt of due proof of death.

SECTION II

DISTRIBUTION REQUIREMENTS UPON DEATH OF THE OWNER

This section is included pursuant to Section 72 of the Internal Revenue Code, as amended.

- Death of Owner - After Annuity Start Date

If the Owner of this contract dies on or after the Annuity Start Date, but before the entire interest in this contract has been distributed, the remaining interest will be distributed at least as rapidly as under the method of payment in effect at the time of death.

Distribution of the remaining payments will continue as originally designated. Any remaining payments due will be paid to the person(s) living on the date of the Owner's death in the following order as Designated Beneficiary:

- Beneficiary.
- Contingent Beneficiary.
- Estate of the Owner.

- Death of Owner - Before Annuity Start Date

If the Owner of this contract dies before the Annuity Start Date, then the entire interest in the contract must be distributed by December 31st of the 5th year after the Owner's death. However, if the Designated Beneficiary is the Owner's spouse, then such spouse may continue this contract as Owner and Annuitant.

Upon Our receipt of due proof of death, distribution of the death benefit will be paid to the person(s) living on the date of the Owner's death in the following order as Designated Beneficiary:

- Beneficiary.
- Contingent Beneficiary.
- Estate of the Owner.

A Designated Beneficiary may elect to have the entire interest in this contract be distributed over the Designated Beneficiary's lifetime (or over a period not extending beyond the life expectancy of the Designated Beneficiary), provided distribution begins within one year of the Owner's death.

SECTION III

GENERAL PROVISIONS

ISSUE DATE

The Issue Date is shown on the Schedule Page. Contract months, years, and anniversaries are figured from this date.

For example: If a contract's Issue Date is June 15, then the first contract month ends July 14. The first contract anniversary is June 15 of the next year.

CONTRACT

This annuity contract is a legal contract between the Owner and Us. The entire contract consists of:

- the attached application;
- the annuity contract form; and
- any endorsements and/or riders added thereto.

All statements in the application shall, in the absence of fraud, be deemed representations and not warranties.

INCONTESTABILITY

This Contract shall be incontestable from the Issue Date.

CHANGES TO CONTRACT

No one has the right to change any part of this Policy or to waive any of its provisions unless the change is approved in writing by Us and signed by one of Our officers. We will not make any changes that reduce or eliminate benefits or coverage or impair or invalidate any right granted to the Owner under this Policy, except to conform to changes in any applicable provisions or requirements of the Internal Revenue Code.

LOST CONTRACT

The Owner may request a duplicate contract. We may, at Our discretion, issue a duplicate contract or certificate to replace this one and this contract would be void. We reserve the right to charge an administrative fee, not to exceed \$25.00, for each duplicate contract requested.

MISSTATEMENT OF AGE OR SEX

If the Annuitant's age or sex has been misstated, the amounts payable either before or after the Annuity Start Date will be what the premium would have bought had the correct age and sex been given. We will require proof of any Annuitant's date of birth and sex before making any annuity payments. Any amounts underpaid by Us on the basis of incorrect age or sex will be paid when the correction is made. Any amounts overpaid by Us on the basis of incorrect age or sex will be charged against payments due after the correction is made. Amounts paid or charged will be adjusted based on an interest rate of 6% per annum.

PREMIUMS

The Initial Premium is due on the Issue Date. The premiums are flexible and the Owner may pay additional premiums before the Annuity Start Date. We require any additional premium paid to be at least \$1,000.00. We reserve the right to not accept any additional premium during periods when the Renewal Interest Rate is $\frac{1}{2}$ % or less higher than the Minimum Guaranteed Interest Rate. We also reserve the right to limit the total premium paid into the contract to \$500,000.00.

ANNUAL REPORT

Prior to the Annuity Start Date, at least once each year and without charge, We will mail to the Owner a report indicating the beginning and end dates of the current report period, the Annuity Purchase Amount at the beginning and end of the current report period, amounts credited and debited during the current report period, the Cash Surrender Value at the end of the current report period, and any other information required by law. The report will be mailed to the last address of the Owner reported to Us. The information will be as of a date not more than four months prior to the date of mailing. Additional reports will be available upon written request for a charge, which will not exceed \$25.00.

NON-PARTICIPATING

This Contract is non-participating and no dividends shall be paid hereunder.

CONTRACT DEPOSITS AND DISBURSEMENTS

All amounts deposited into this contract must be in United States currency. All amounts paid from this contract from Our Home Office will be in United States currency.

SECTION IV

BENEFITS BEFORE THE ANNUITY START DATE

CASH SURRENDER VALUE

The Owner may return this contract at any time before the Annuity Start Date and receive the Cash Surrender Value.

Before the Annuity Start Date, the Cash Surrender Value equals the Annuity Purchase Amount multiplied by (1 - Surrender Charge Percentage) for the indicated contract year as stated on the Schedule Page. The Annuity Purchase Amount is described in Section V.

WAIVER OF SURRENDER CHARGE

Applicable surrender charges, if any, will be waived:

- If payments are made under an annuity option.
- For the payment of any death benefit.
- In the case of a Terminal Illness Partial Withdrawal or Surrender, subject to the conditions noted below.

TERMINAL ILLNESS SURRENDER OR PARTIAL WITHDRAWAL

Before the Annuity Start Date, a Terminal Illness Surrender or Partial Withdrawal may be requested by the Owner.

The surrender charge percent is equal to zero (0) for any Terminal Illness Surrender or Partial Withdrawal if satisfactory proof that the Owner is terminally ill is received by Us.

Terminal illness is defined as an illness which limits the Owner's life expectancy to less than twelve (12) months. We will require proof that is satisfactory to Us that the Owner is terminally ill and not expected to live more than twelve (12) months. The proof will include, but is not limited to, certification by a Physician.

A Physician is defined as a licensed medical practitioner performing within the scope of his/her license. The Physician must not be the Owner, the Annuitant, or the parent, spouse or the child of the Owner or the Annuitant.

A Terminal Illness Surrender or Partial Withdrawal will be paid only to the Owner. Payment of the Terminal Illness Surrender will be considered full settlement of the Company's liability under the contract to the Owner, and the contract will terminate.

PARTIAL WITHDRAWAL BENEFIT

Before the Annuity Start Date, the Owner may make partial withdrawals from the Annuity Purchase Amount. These withdrawals are limited as follows:

- Partial withdrawals may not reduce the balance of the Annuity Purchase Amount to less than \$1,000.00.
- On an Unscheduled basis, the minimum amount that may be withdrawn is \$250.00.
- On a Scheduled basis, the minimum amount that may be withdrawn is \$100.00.

Any partial withdrawal may be subject to a surrender charge as stated on the Schedule Page. The partial withdrawal will be multiplied by $(1 - \text{Surrender Charge Percentage})$ for the indicated contract year.

Required Minimum Distributions based on the Annuity Purchase Amount in the contract and in accordance with Internal Revenue Service regulations will not be subject to a surrender charge.

We may charge an Administrative Fee, not to exceed \$25.00, for each Partial Withdrawal in excess of 6 (six) per contract year.

DELAY IN PAYMENT

We can delay paying the Cash Surrender Value or any partial withdrawal for up to 6 months from the date We receive the request. We will not delay payment of any death benefit.

CREDITED INTEREST RATES

We credit interest daily. The interest rates shown on the Schedule Page and described herein represent an effective annual interest rate. An effective annual interest rate represents the rate that will result if money is left on deposit for a full year. Declared interest rates will not be lower than the Minimum Guaranteed Interest Rate stated on the Schedule Page.

The Initial Interest Rate is the rate credited on the Initial Premium during the first contract year, as stated on the Schedule Page.

The New Money Interest Rate is the rate credited on an Additional Premium payment for a period of one year from the date the Additional Premium is received in Our Home Office.

The Renewal Interest Rate is the rate credited on any portion of the Annuity Purchase Amount which is not subject to the Initial Interest Rate or New Money Interest Rate. On each contract anniversary We will specify the Renewal Interest Rate which will apply for the following year.

ADDITIONAL PREMIUMS

Each Additional Premium paid will be credited, for a period of one year, with the New Money Interest Rate in effect for Additional Premiums at the time the Additional Premium is received in Our Home Office. After one year from the date that an Additional Premium is received, that Additional Premium, and any interest earned thereon, will be credited with the Renewal Interest Rate then in effect for the contract, until the next contract anniversary.

SECTION V

BENEFITS AFTER THE ANNUITY START DATE

ANNUITY PURCHASE AMOUNT

The Annuity Purchase Amount on the Annuity Start Date will be used to calculate Annuity payments.

At any time before and on the Annuity Start Date, the Annuity Purchase Amount will equal:

- the Premiums paid; plus
- any interest credited; less
- any partial withdrawals as described in Section IV.

WHEN ANNUITY PAYMENTS BEGIN

The Annuity Start Date shown on the Schedule Page is the date when annuity payments are scheduled to begin. Before the Annuity Start Date, the Owner may request to change the Annuity Start Date. The Annuity Start Date shall be no earlier than Age 50 nor later than Age 99 of the Annuitant named in the Application. Ages are as of the Annuitant's nearest birthday.

HOW OFTEN PAYMENTS WILL BE MADE

Tables of guaranteed monthly payments appear at the end of this section. Before the Annuity Start Date, the Owner may request to have Annuity payments made less often than monthly.

If a payment under any income payment option chosen is less than \$100.00, We can make larger payments to the Annuitants at less frequent intervals. If the annual installment is less than \$500.00, We can pay the Annuity Purchase Amount in one lump sum to the Annuitant and this contract will end.

MINIMUM VALUES

The Annuity Purchase Amount, Cash Surrender Value and death proceeds are not less than the minimum benefits required by the NAIC Standard Nonforfeiture Law for Individual Deferred Annuities, model #805.

ANNUITY PAYMENT OPTIONS

Annuity payments will be made as stated on the Schedule Page. If no option is elected on the Annuity Start Date, payments will be made pursuant to Option 3. However, before the Annuity Start Date, the Owner may request to have such payments made under one of the following options:

Option 1: Fixed Period or Amount. Payments are made in uniform installments for a fixed period of time, and then the annuity terminates. Payments are not affected by the Annuitant's age, sex, or length of life. The Owner may choose the period of time over which payments are made. We will determine the payment which will pay out the Annuity Purchase Amount, with interest, over the chosen period. The Owner may, instead, choose the amount of the payment. We will then determine the period of payment. A smaller final payment may be necessary to complete the distribution of the proceeds. The payment period under Option 1 must extend beyond the Surrender Charge Period stated on the Schedule Page, as measured from the Issue Date.

Option 2: Life Income. Payments are made for as long as the named Annuitant lives. The annuity terminates upon the death of that named Annuitant.

Option 3: Life Income with 10 Years Guaranteed. Annuity Payments are made to the named Annuitant for as long as the Annuitant lives or for 10 years, whichever is longer.

Option 4: Life Income with 15 Years Guaranteed. Annuity Payments are made to the named Annuitant for as long as the Annuitant lives or for 15 years, whichever is longer.

Option 5: Life Income with 20 Years Guaranteed. Annuity Payments are made to the named Annuitant for as long as the Annuitant lives or for 20 years, whichever is longer.

Payments under Option 1 end with the last payment in the guaranteed period. Payments due under the guaranteed period but after the named Annuitant's death will be made to the Beneficiary as originally scheduled.

Payments under Option 2 will end with the payment due immediately before the date of the named Annuitant's death.

Payments under Options 3, 4, and 5 will end with the payment due immediately before the named Annuitant's death or the date of the last guaranteed payment, whichever is longer. Payments due under the guaranteed period but after the named Annuitant's death will be made to the Beneficiary as originally scheduled.

Payments will be based on an annual interest rate of not less than 1%. Payments made under any Option after the death of the named Annuitant, but before notification to Us, that are not due or reduce in amount under the terms of the chosen Payment Option will be reimbursed to Us or will be recovered from any remaining payments due to the Beneficiary.

To the extent allowed by law, amounts to be paid under any option will be free from the claims of creditors of the person or persons named to receive payments.

TABLES OF GUARANTEED MONTHLY ANNUITY PAYMENTS

These tables show the minimum guaranteed monthly payments for each \$1,000 of Annuity Purchase Amount applied. The Annuity Purchase Amount for any age or combination of ages not shown in these tables will be calculated on the same basis as the payments for those shown and may be obtained by written request.

Annuity benefits at the time of their commencement will not be less than those that would be provided by the application of the Cash Surrender Value to purchase a single premium immediate annuity contract at purchase rates offered by Us at the time to the same class of annuitants.

Vantis Life Insurance Company
Guaranteed Settlement Options for Deferred Annuities
Monthly Income per \$1,000 of Annuitized Proceeds
Interest Basis 1.00% Compounded Annually

Option 1: Fixed Period or Amount

Number of Years of Payment	Monthly Payment
1	83.71
2	42.07
3	28.18
4	21.24
5	17.08
6	14.30
7	12.32
8	10.83
9	9.68
10	8.75
11	7.99
12	7.36
13	6.83
14	6.37
15	5.98
16	5.63
17	5.33
18	5.05
19	4.81
20	4.59

Vantis Life Insurance Company

Guaranteed Settlement Options for Deferred Annuities

Monthly Income per \$1,000 of Annuitized Proceeds

Year 2000 Valuation Table projected to 2025 with projection scale G, Interest Basis 1.00%

Age of Annuitant	Female				Male			
	Opt 2 Life only	Opt 3 Life w/10	Opt 4 Life w/15	Opt 5 Life w/20	Opt 2 Life only	Opt 3 Life w/10	Opt 4 Life w/15	Opt 5 Life w/20
50	2.56	2.55	2.54	2.53	2.76	2.75	2.74	2.71
51	2.61	2.60	2.59	2.58	2.82	2.81	2.79	2.76
52	2.66	2.66	2.65	2.63	2.89	2.87	2.85	2.82
53	2.72	2.71	2.70	2.68	2.95	2.94	2.92	2.88
54	2.78	2.77	2.76	2.74	3.02	3.01	2.98	2.93
55	2.84	2.83	2.82	2.79	3.10	3.08	3.05	2.99
56	2.91	2.90	2.88	2.85	3.18	3.15	3.12	3.06
57	2.98	2.97	2.95	2.91	3.26	3.23	3.19	3.12
58	3.05	3.04	3.01	2.97	3.34	3.31	3.27	3.19
59	3.13	3.11	3.09	3.04	3.43	3.40	3.35	3.25
60	3.21	3.19	3.16	3.11	3.53	3.49	3.43	3.32
61	3.30	3.27	3.24	3.18	3.63	3.59	3.51	3.39
62	3.39	3.36	3.32	3.25	3.74	3.69	3.60	3.46
63	3.49	3.46	3.41	3.32	3.86	3.80	3.70	3.54
64	3.59	3.55	3.50	3.40	3.98	3.91	3.79	3.61
65	3.70	3.66	3.59	3.48	4.11	4.03	3.89	3.68
66	3.82	3.77	3.69	3.55	4.25	4.15	3.99	3.75
67	3.94	3.89	3.79	3.63	4.40	4.28	4.10	3.83
68	4.07	4.01	3.90	3.71	4.56	4.41	4.20	3.90
69	4.22	4.14	4.01	3.79	4.73	4.55	4.31	3.96
70	4.37	4.28	4.12	3.87	4.91	4.70	4.42	4.03
71	4.54	4.42	4.24	3.95	5.10	4.85	4.53	4.10
72	4.71	4.57	4.36	4.02	5.30	5.01	4.63	4.16
73	4.90	4.74	4.48	4.09	5.51	5.17	4.74	4.21
74	5.11	4.90	4.60	4.16	5.74	5.34	4.85	4.27
75	5.33	5.08	4.72	4.22	5.98	5.51	4.96	4.32
76	5.57	5.27	4.84	4.28	6.24	5.69	5.06	4.36
77	5.82	5.46	4.96	4.34	6.52	5.87	5.16	4.40
78	6.10	5.65	5.08	4.38	6.82	6.06	5.26	4.44
79	6.40	5.86	5.19	4.43	7.14	6.24	5.35	4.47
80	6.72	6.07	5.29	4.47	7.48	6.43	5.43	4.50
81	7.07	6.28	5.39	4.50	7.85	6.62	5.52	4.52
82	7.45	6.49	5.49	4.52	8.24	6.81	5.59	4.54
83	7.86	6.70	5.57	4.54	8.67	7.00	5.66	4.56
84	8.31	6.91	5.65	4.56	9.12	7.18	5.72	4.57
85	8.80	7.12	5.72	4.57	9.62	7.36	5.78	4.58
86	9.33	7.31	5.78	4.58	10.15	7.53	5.82	4.58
87	9.90	7.51	5.83	4.58	10.73	7.69	5.86	4.59
88	10.53	7.69	5.87	4.59	11.36	7.85	5.90	4.59
89	11.21	7.87	5.90	4.59	12.04	8.01	5.92	4.59
90	11.96	8.03	5.93	4.59	12.80	8.15	5.94	4.59

APPLICATION FOR TAXSAVER INDIVIDUAL FLEXIBLE PREMIUM ANNUITY

Annuity Plan Choice (choose only one): ☐ TaxSaver Classic 3 ☐ TaxSaver Classic 5 ☐ TaxSaver Classic 7
☐ TaxSaver Prestige Plus

Annuity Type (choose only one): ☐ Qualified ☐ Non-Qualified

♦ **ANNUITANT INFORMATION**

Full Legal Name				
Social Security Number				
Date of Birth	Month	Day	Year	Sex <input type="checkbox"/> M <input type="checkbox"/> F
Address				
City		State		Zip
Daytime Phone: ()				

♦ **JOINT ANNUITANT (OPTIONAL - NON-QUALIFIED ONLY)**

Full Legal Name				
Social Security Number				
Date of Birth	Month	Day	Year	Sex <input type="checkbox"/> M <input type="checkbox"/> F
Address				
City		State		Zip
Daytime Phone: ()				

♦ **OWNER INFORMATION (IF OTHER THAN ANNUITANT - NON-QUALIFIED ONLY)**

Full Legal Name				
Social Security Number				
Date of Birth	Month	Day	Year	Sex <input type="checkbox"/> M <input type="checkbox"/> F
Address				
City		State		Zip
Daytime Phone: ()				

♦ **JOINT OWNER (OPTIONAL - NON-QUALIFIED ONLY)**

Full Legal Name				
Social Security Number				
Date of Birth	Month	Day	Year	Sex <input type="checkbox"/> M <input type="checkbox"/> F
Address				
City		State		Zip
Daytime Phone: ()				

♦ **BENEFICIARY INFORMATION** (If additional space is needed, please attach separate sheet)

Please complete <u>all</u> Beneficiary(ies) information listed below: <i>Please note: All Beneficiaries in one class will share equally, unless otherwise stated.</i>			
Name:		Address:	
Relationship to Annuitant:		Date of Birth:	Social Security No.:
Beneficiary Class: (Check One)		<input type="checkbox"/> Primary	or <input type="checkbox"/> Contingent
Name:		Address:	
Relationship to Annuitant:		Date of Birth:	Social Security No.:
Beneficiary Class: (Check One)		<input type="checkbox"/> Primary	or <input type="checkbox"/> Contingent
Name:		Address:	
Relationship to Annuitant:		Date of Birth:	Social Security No.:
Beneficiary Class: (Check One)		<input type="checkbox"/> Primary	or <input type="checkbox"/> Contingent

♦ **PREMIUM PAYMENT**

Initial Premium with application \$ _____	If Qualified, IRA Annuity Contribution Tax Year _____
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♦ **REPLACEMENT**

Will the annuity applied for replace or change any existing life insurance or annuity contracts?	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, complete TaxFree Transfer form ANNO111 and replacement form if necessary
Will this application replace a Qualified Retirement Plan or IRA?	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, complete TaxFree Transfer form ANNO111
Does the owner have any existing life insurance or annuity contracts?	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, complete replacement form

♦ **ANNUITY START DATE AND INCOME PAYMENT OPTION**

This contract will annuitize at age 99 for the oldest Annuitant, with a payment option of Life Income with 10 Years Guaranteed. The Owner may change the Annuity Start Date and Payment Option at any time prior to the Annuity Start Date. After the Annuity Start Date and once Annuity Payments commence, this contract may not be surrendered for its cash value nor may the Annuity Payment Option be altered.

♦ **OWNER ACKNOWLEDGEMENT**

- 1) Annuities are NOT deposits; NOT insured by the FDIC/NCUA or any other federal government agency; NOT obligations of, nor guaranteed by any bank or credit union. Annuities may be subject to investment risk.
- 2) The annuity that you are purchasing is issued by Vantis Life Insurance Company (Vantis Life) and the sales representative selling the annuity is a licensed producer of Vantis Life.
- 3) If this is a transfer of an existing annuity, I understand that I should investigate any charges that may be imposed on the annuity being transferred.
- 4) Distributions made prior to age 59 1/2 will be subject to a federal income tax penalty of 10%. All taxable distributions, at any age, are subject to ordinary income tax.
- 5) Tax saver contracts contain surrender or withdrawal charges that may be applied to the amount of each withdrawal or contract surrender. TaxSaver Classic 7 and Prestige Plus includes a provision which permits 10% of the contract value as of the last contract anniversary to be withdrawn each contract year without any withdrawal charges.

Surrender and withdrawal charges are as follows:

Contract Year	1	2	3	4	5	6	7	Thereafter
TaxSaver Classic 3	3%	3%	3%	0%	0%	0%	0%	0%
TaxSaver Classic 5	5%	4%	3%	2%	1%	0%	0%	0%
TaxSaver Classic 7	7%	7%	7%	6%	5%	4%	3%	0%
TaxSaver Prestige Plus	7.5%	6.5%	5.5%	4.5%	3.5%	2.5%	1.5%	0%

- 6) The approval of an extension of credit to you by the depository institution may not be conditioned on the purchase of an annuity from the institution, and you are free to purchase the annuity from another source.
- 7) I have read this application, the attached fraud statement and all statements and answers, as they pertain to me, are true and complete to the best of my knowledge and belief. I understand that answers and statements in this application are the basis for any contract issued by Vantis Life and no information about me will be considered to have been given to Vantis Life unless it is stated in the application.
- 8) An agent does not have Vantis Life's authorization to accept risk, pass on insurability or make, void, waive or change any conditions or provisions of the application or contract.
- 9) Vantis Life shall have no liability until a contract is issued on this application and delivered to and accepted by the Owner and the first premium due is paid in full while each proposed owner and annuitant is alive.

X

Signature of Owner

X

Signature of Joint Owner (if applicable)

Date

Agent: Does Annuitant have existing life insurance or annuity contracts?

☐ No

☐ Yes

Will this application replace or change any existing life insurance or annuity contracts?

☐ No

☐ Yes

(If "Yes" to either question, submit state specific form.)

X

Vantis Life Agent Sign Here

City

State

NAME OF
AGENCY

INTERNAL USE ONLY

PRODUCER #

BRANCH #

Agent's Name (Print):

Agent's Signature:

TRADITIONAL INDIVIDUAL RETIREMENT ANNUITY ENDORSEMENT

ARTICLE I

1.01 *Purpose*: The purpose of this Endorsement, which is attached to and made a part of the annuity Contract issued by the Issuer, is to qualify the Contract as an individual retirement annuity (IRA) under Code Section 408(b) to provide for the IRA Owner's retirement and for the support of his or her Beneficiary(ies) after death. The Contract is established for the exclusive benefit of the IRA Owner and his or her Beneficiary(ies). If this is an inherited IRA within the meaning of Code Section 408(d)(3)(C) maintained for the benefit of a Designated Beneficiary of a deceased individual, references in this document to the "IRA Owner" are to the deceased individual. If any provisions of the Contract conflict with this Endorsement, the provisions of this Endorsement will apply.

1.02 *Ownership Provisions*: The IRA Owner's interest in the Contract is nonforfeitable and nontransferable and the IRA Owner may exercise all rights under the Contract during his or her lifetime. In addition, the Contract may not be sold, assigned, discounted, or pledged as collateral or as security for the performance of an obligation or for any other purpose.

1.03 *For More Information*: To obtain more information concerning the rules governing this Endorsement, contact the Issuer listed on the Application.

ARTICLE II – DEFINITIONS

The following words and phrases, when used in this Endorsement with initial capital letters, shall, for the purpose of this Endorsement, have the meanings set forth below unless the context indicates that other meanings are intended.

2.01 *Application*: Means the document executed by the IRA Owner through which the IRA Owner adopts this Endorsement and thereby agrees to be bound by all terms and conditions of this Endorsement.

2.02 *Beneficiary*: Means the individual(s) or entity(ies) properly named to receive any remaining IRA benefits upon the death of the IRA Owner.

2.03 *Code*: Means the Internal Revenue Code of 1986, as amended from time to time.

2.04 *Contract*: Means the annuity contract used in conjunction with this Endorsement.

2.05 *Designated Beneficiary*: Means the Beneficiary named as of the date of the IRA Owner's death who remains a Beneficiary as of September 30 of the year following the year of the IRA Owner's death.

2.06 *Endorsement*: Means this IRA Endorsement, that is attached to the contract to establish this IRA.

2.07 *IRA*: Means a Traditional IRA as defined in Code Section 408(b) unless otherwise indicated.

2.08 *IRA Owner*: Means the individual who participates in this IRA, thereby owning the Contract.

2.09 *Issuer*: Means Vantis Life Insurance Company, 200 Day Hill Road, Windsor, CT 06095, 866-826-8471.

2.10 *Premium*: Means any payments made to the IRA.

2.11 *Regulations*: Means the Treasury regulations.

2.12 *SIMPLE IRA*: Means an IRA which satisfies the requirements of Code Sections 408(b) and 408(p).

ARTICLE III – PREMIUM PAYMENTS

3.01 *Maximum Permissible Premiums*. The Issuer may accept Premiums on behalf of the IRA Owner for a tax year of the IRA Owner.

A. **Regular Premiums**. Except in the case of a rollover Premium (as permitted by Code Sections 402(c), 402(e)(6), 403(a)(4), 403(b)(8), 403(b)(10), 408(d)(3) and 457(e)(16)) or a Premium made in accordance with the terms of a Simplified Employee Pension (SEP) plan as described in Code Section 408(k), no Premiums will be accepted unless they are in cash, and the total of such Premiums shall not exceed the lesser of 100 percent of the IRA Owner's Compensation, or \$5,000 for any taxable year beginning in 2008 and years thereafter.

After 2008, the Premium limit will be adjusted by the Secretary of the Treasury for cost-of-living increases under Code Section 219(b)(5)(D). Such adjustments will be in multiples of \$500.

If the IRA Owner makes regular Premiums to both Traditional and Roth IRAs for a taxable year, the maximum regular Premium that can be made to all the IRA Owner's Traditional IRAs for that taxable year is reduced by the regular Premiums made to the IRA Owner's Roth IRAs for the taxable year.

B. **Catch Up Premiums**. In the case of an IRA Owner who is age 50 or older by the close of the taxable year, the annual Premium limit is increased by \$1,000 for any taxable year beginning in 2006 and years thereafter.

C. **Additional Premiums**. In addition to the amounts described in Sections 3.01(A) and (B) of this Endorsement, an IRA Owner may make additional premiums specifically authorized by statute such as repayments of qualified reservist distributions, repayments of certain plan distributions made on account of a federally declared disaster and certain amounts received in connection with the Exxon Valdez litigation.

D. **Employees of Certain Bankrupt Employers**. In addition to the amounts described in Section 3.01(A) and (C) of this Endorsement, an IRA Owner who was a participant in a Code Section 401(k) plan of a certain employer in bankruptcy described in Code Section 219(b)(5)(C) may contribute up to \$3,000 for taxable years beginning after 2006 and before 2010 only. An IRA Owner who makes Premiums under this section may not also make catch-up Premiums.

E. **SIMPLE IRA**. No Premiums will be accepted under a SIMPLE IRA plan established by an employer pursuant to Code Section 408(p). Also, no transfer or rollover of funds attributable to Premiums made by a particular employer under its SIMPLE IRA plan will be accepted from a SIMPLE IRA, that is, an IRA used in conjunction with a SIMPLE IRA plan, prior to the expiration of the two-year period beginning on the date the employee first participated in that employer's SIMPLE IRA plan.

F. **Inherited IRA**. If this is an inherited IRA within the meaning of Code Section 408(d)(3)(C), no Premiums will be accepted.

3.02 *Excess Premium.* Any refund of Premiums (other than those attributable to excess Premiums) will be applied, before the close of the calendar year following the year of the refund, toward the payment of future Premiums or the purchase of additional benefits.

3.03 *Contract Requirements.* If Premiums are interrupted, the Contract will be reinstated at any date prior to maturity upon payment of a Premium other than a rollover or transfer Premium, to the Issuer, and the minimum Premium amount for reinstatement shall be \$_____ (not to exceed \$50). However, the Issuer may, at its option, either accept additional future Premiums or terminate the contract by payment in cash of the then present value of the paid up benefit if no Premiums have been received for two full consecutive policy years and the paid up annuity benefit at maturity would be less than \$20 per month.

ARTICLE IV – DISTRIBUTION REQUIREMENTS

4.01 *IRA Owner Distributions*

Notwithstanding any provision of this IRA to the contrary, the distribution of the IRA Owner's interest in the IRA shall be made in accordance with the requirements of Code Section 408(b)(3) and the Regulations thereunder, the provisions of which are herein incorporated by reference. If distributions are not made in the form of an annuity on an irrevocable basis (except for acceleration), then distribution of the interest in the IRA (as determined under Section 4.01(D) of this Endorsement) must satisfy the requirements of Code Section 408(a)(6) and the Regulations thereunder, rather than Section 4.01(A), (B) and (C) and Section 4.02 of this Endorsement

- A. The entire interest of the IRA Owner for whose benefit the IRA is maintained will commence to be distributed no later than the first day of April following the calendar year in which such IRA Owner attains age 70½ (the "required beginning date") over
1. the IRA Owner's life or the lives of such IRA Owner and his or her Designated Beneficiary(ies), or
 2. a period certain not extending beyond the IRA Owner's life expectancy or the joint and last survivor expectancy of such IRA Owner and his or her Designated Beneficiary(ies).

Distributions must be made in periodic payments at intervals of no longer than one year and must be either nonincreasing or they may increase only as provided in Q&As-1 and -4 of Regulations Section 1.401(a)(9)-6. In addition, any distribution must satisfy the incidental benefit requirements specified in Q&A-2 of 1.401(a)(9)-6. If this is an inherited IRA within the meaning of Code Section 408(d)(3)(C), this paragraph and Section 4.01(B) and (C) of this Endorsement do not apply.

- B. The distribution periods described in Section 4.01(A) of this Endorsement cannot exceed the periods specified in Regulations Section 1.401(a)(9)-6.
- C. The first required distribution can be made as late as the required beginning date and must be the distribution that is required for one payment interval. The second distribution need not be made until the end of the next payment interval.

D. The "interest" in the IRA for purposes of this Section is the prior December 31 balance adjusted to include the amount of any outstanding rollovers, transfers and recharacterizations under Q&As-7 and -8 of Regulations Section 1.408-8 and the actuarial value of any other benefits provided under the IRA, such as guaranteed death benefits.

E. If the IRA Owner fails to elect a method of distribution by his or her required beginning date the Issuer shall have complete and sole discretion to do any one of the following:

- make no distribution until the IRA Owner provides a proper withdrawal request;
- distribute the IRA Owner's entire interest in a single sum payment;
- distribute the IRA Owner's entire interest over a period certain not extending beyond the IRA Owner's life expectancy or the life expectancy of the IRA Owner and his or her Beneficiary; or
- annuitize the IRA within the parameters described in this Section.

The Issuer will not be liable for any penalties or taxes related to the IRA Owner's failure to take a required minimum distribution.

4.02 *Beneficiary Rights.* If the IRA Owner dies before his or her entire interest is distributed to him or her, the entire remaining interest will be distributed as follows.

- A. **Death on or after Required Beginning Date.** If the IRA Owner dies on or after required distributions commence, the remaining portion of such IRA Owner's interest will continue to be distributed under the contract option chosen.
- B. **Death before Required Beginning Date.** If the IRA Owner dies before required distributions commence, such IRA Owner's entire interest will be distributed at least as rapidly as follows.
1. If the Designated Beneficiary is someone other than the IRA Owner's surviving spouse, the entire interest will be distributed, starting by the end of the calendar year following the calendar year of the IRA Owner's death, over the remaining life expectancy of the Designated Beneficiary, with such life expectancy determined using the age of the Beneficiary as of his or her birthday in the year following the year of the IRA Owner's death, or, if elected, in accordance with Section 4.02(B)(3) of this Endorsement. If this is an inherited IRA within the meaning of Code Section 408(d)(3)(C) established for the benefit of a Nonspouse designated beneficiary by a direct trustee-to-trustee transfer from a retirement plan of a deceased individual under code section 402(c)(11), then, notwithstanding any election made by the deceased individual pursuant to the preceding sentence, the Nonspouse designated beneficiary may elect to have distributions made under this Section if the transfer is made no later than the end of the year following the year of death.
 2. If the IRA Owner's sole Designated Beneficiary is the IRA Owner's surviving spouse, the entire interest will

be distributed, starting by the end of the calendar year following the calendar year of the IRA Owner's death (or by the end of the calendar year in which the IRA Owner would have attained age 70½, if later), over such spouse's life expectancy, or, if elected, in accordance with Section 4.02(B)(3) of this Endorsement. If the surviving spouse dies before required distributions are required to begin, the remaining interest will be distributed, starting by the end of the calendar year following the calendar year of the spouse's death, over the spouse's Designated Beneficiary's remaining life expectancy determined using such Beneficiary's age as of his or her birthday in the year following the death of the spouse, or, if elected, will be distributed in accordance with Section 4.02(B)(3) of this Endorsement. If the surviving spouse dies after required distributions commence to him or her, any remaining interest will continue to be distributed under the contract option chosen.

3. If there is no Designated Beneficiary, or, if applicable by operation of Section 4.02(B)(1) or (B)(2) of this Endorsement, the entire interest will be distributed by the end of the calendar year containing the fifth anniversary of the IRA Owner's death (or the spouse's death in the case of the surviving spouse's death before distributions are required to begin under Section 4.02(B)(2) of this Endorsement).
4. Life expectancy is determined using the Single Life Table in Q&A-1 of Regulations Section 1.401(a)(9)-9. If distributions are being made to a surviving spouse as the sole Designated Beneficiary, such spouse's remaining life expectancy for a year is the number in the Single Life Table corresponding to such spouse's age in the year. In all other cases, remaining life expectancy for a year is the number in the Single Life Table corresponding to the Beneficiary's age in the year specified in Section 4.02(B)(1) or (2) of this Endorsement and reduced by one for each subsequent year.
- C. The "interest" in the IRA for purposes of this Section is the prior December 31 balance adjusted to include the amount of any outstanding rollovers, transfers and recharacterizations under Q&As-7 and -8 of Regulations Section 1.408-8 and the actuarial value of any other benefits provided under the IRA, such as guaranteed death benefits.
- D. For purposes of Sections 4.02(A) and (B) of this Endorsement, required distributions are considered to commence on the IRA Owner's required beginning date, or, if applicable, on the date distributions are required to begin to the surviving spouse under Section 4.02(B)(2) of this Endorsement. However, if distributions start prior to the applicable date in the preceding sentence, on an irrevocable basis (except for acceleration) under an annuity contract meeting the requirements of Regulations Section 1.401(a)(9)-6, the required distributions are considered to commence on the annuity starting date.
- E. If the Designated Beneficiary is the IRA Owner's surviving spouse, the spouse may elect to treat the IRA as his or her own IRA. This election will be deemed to have been made if such surviving spouse, who is the sole

Beneficiary of the IRA, makes a Premium to the IRA or fails to take required distributions as a Beneficiary.

- F. The required minimum distributions payable to a Designated Beneficiary from this IRA may be withdrawn from another IRA the beneficiary holds from the same deceased IRA Owner in accordance with Q&A-9 of Regulations Section 1.408-8.
- G. If the Beneficiary payment election described in Section 4.02 is not made by December 31 of the year following the year the IRA Owner dies, the Issuer reserves the right to elect, in its complete and sole discretion, to do any one of the following:
 - make no distribution until the Beneficiary(ies) provides a proper withdrawal request;
 - distribute the entire IRA to the Beneficiary(ies) in a single sum payment;
 - distribute the entire remaining interest to the Beneficiary(ies) pursuant to the applicable option in Sections 4.02(A) or (B) of this Endorsement.

The Issuer will not be liable for any penalties or taxes related to the Beneficiary's failure to take a required minimum distribution.

ARTICLE V – REPORTING

The IRA Owner agrees to provide the Issuer with information necessary for the Issuer to prepare any report required under Code Section 408(i), Regulations Sections 1.408-5 and 1.408-6 and under guidance published by the Internal Revenue Service (IRS).

The Issuer shall furnish annual calendar year reports concerning the status of the annuity and such information concerning required minimum distributions as is prescribed by the IRS.

ARTICLE VI – AMENDMENTS

Any amendment made for the purpose of complying with provisions of the Code and related Regulations may be made without the consent of the IRA Owner. The IRA Owner will be deemed to have consented to any other amendment unless the IRA Owner notifies the Issuer that he or she does not consent within 30 days from the date the Issuer mails the amendment to the IRA Owner.

ARTICLE VII – RESPONSIBILITY OF THE PARTIES

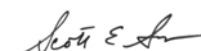
The IRA Owner must comply with the tax qualified plan provisions to prevent loss of the advantages of tax deferral and to prevent tax penalties.

The Issuer shall not be responsible for any penalties, taxes, judgments or expenses incurred by the IRA Owner in connection with this IRA and shall have no duty to determine whether any Premiums to or distributions from this IRA comply with the Code, Regulations, rulings or this Endorsement.

Signed for Vantis Life Insurance Company at its Home Office, 200 Day Hill Rd., Windsor, CT 06095.



Peter Tedone, President and CEO



Scott Smith, Sr. Vice President

<i>SERFF Tracking Number:</i>	<i>FRCS-127037652</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Vantis Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48054</i>
<i>Company Tracking Number:</i>	<i>5353</i>		
<i>TOI:</i>	<i>A021 Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A021.002 Flexible Premium</i>
<i>Product Name:</i>	<i>Classic and Prestige Annuities</i>		
<i>Project Name/Number:</i>	<i>VANTIS/86/86</i>		

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification Comments: Attachments: FCA Authorization-dist.pdf AR COC - CX1001.pdf AR RDB - CX1001.pdf		
Bypassed - Item: Application Bypass Reason: Attached to Form Schedule. Comments:		
Satisfied - Item: Life & Annuity - Acturial Memo Comments: Attachment: GENERIC ActMemo_TaxSaver_Classic_Indexed 2011.pdf		
Satisfied - Item: Fraud Warning Page Comments: Attachment: Fraud Language JULY 2010-dist.pdf		



February 15, 2011

To: The Insurance Commissioner

Authorization

This letter, or a copy thereof, will authorize the consulting firm of First Consulting & Administration, Inc., Kansas City, Missouri, to represent this Company in matters before the Insurance Department.

This Authorization shall be valid until revoked by us.

Vantis Life Insurance Company

By: 

Title: Compliance Manager

**STATE OF ARKANSAS
CERTIFICATION OF COMPLIANCE**

Company Name: Vantis Life Insurance Company

Form Title(s): Individual Flexible Premium Deferred Annuity, Application, IRA
Endorsement

Form Number(s): CMP CX1001, CMP 2861, CMP ENDIRA

I hereby certify that to the best of my knowledge and belief, the above form(s) and submission complies with Reg. 19, as well as the other laws and regulations of the State of Arkansas.



Margaret Mancarella
Compliance Manager

February 15, 2011

Date

STATE OF ARKANSAS
READABILITY CERTIFICATION

COMPANY NAME: Vantis Life Insurance Company

This is to certify that the form(s) referenced below has achieved a Flesch Reading Ease Score as indicated below and complies with the requirements of Ark. Stat. Ann. Section 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

Form Number	Score
CMP CX1001	52.5
CMP 2861	55.2
CMP ENDIRA	*

*Exempt from readability requirements due to IRS language.



Margaret Mancarella
Compliance Manager

February 15, 2011

Date



For residents of AR, IA, IL, OH, MA: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact materials thereto commits a fraudulent insurance act, which is a crime.

For residents of AK: A person who knowingly and with intent to injure, defraud, or deceive an insurance company files a claim containing false, incomplete, or misleading information may be prosecuted under state law

For residents of AZ: For your protection Arizona law requires the following statement to appear on this form. Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.

For residents of CA: For your protection California law requires the following to appear on this form: Any person who knowingly presents false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

For residents of CO: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.

For residents of DE, ID: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, files a statement of claim containing any false, incomplete or misleading information is guilty of a felony.

For residents of IN: A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information commits a felony.

For residents of FL, KY, TX: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, or incomplete or misleading information is guilty of a felony of the third degree.

For residents of DC, LA, RI: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

For residents of MD: Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison

For residents of MN: A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

For residents of ND, TN, WA: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines, or denial of insurance benefit.

For residents of ME: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines, or denial of insurance benefit.

For residents of NH: Any person who, with a purpose to injure, defraud, or deceive any insurance company, files a statement of claim containing any false, incomplete, or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.”

For residents of NJ: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

For residents of NM: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information for payment of a loss or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and prison.

For residents of NY: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

For residents of OK: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

For residents of OR: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact materials thereto may be guilty of insurance fraud and may be subject to prosecution.

For residents of PA: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subject such person to criminal and civil penalties.

<i>SERFF Tracking Number:</i>	<i>FRCS-127037652</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Vantis Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48054</i>
<i>Company Tracking Number:</i>	<i>5353</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>Classic and Prestige Annuities</i>		
<i>Project Name/Number:</i>	<i>VANTIS/86/86</i>		

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
02/15/2011	Supporting Life & Annuity - Acturial Memo Document		12/07/2011	GENERIC ActMemo_TaxSaver_Classic _Indexed 2010 - FINAL.pdf (Superceded)